06/19/2006 19:24

Image# 26950171392

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) 655 Beach Street ADDRESS (number and street) Check if different than previously San Francisco CA 94109 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00196246 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 05 0 1 2006 05 3 1 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Benjamin Bank Type or Print Name of Treasurer Electronically Filed by Benjamin Bank 06 19 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) [®] D D 0.5 0 1 2006 0.5 3 1 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 535866.50 [°]2006 January 1 (b) Cash on Hand at 469883.60 Begining of Reporting Period 19360.95 180430.48 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 489244.55 716296.98 6(a) and 6(c) for Column B) 47112.58 274165.01 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 442131.97 442131.97 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

Report Covering the Period:

From:

м м 0 5 01

^Y 2 0 0 6

To:

м м 0 5 ^D 3 1

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	17133.75	162252.50
	(ii) Unitemized	2166.25	17347.50
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	19300.00	179600.00
((b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	19300.00	179600.00
	Transfers From Affiliated/Other	0.00	0.00
3. /	All Loans Received	0.00	0.00
	oan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
t	to Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	60.95	830.48
-	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	19360.95	180430.48
	Total Federal Receipts (subtract Line 18(c) from Line 19)	19360.95	180430.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal	-	
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	1112.58	4300.01
	(c) Total Operating Expenditures	1110.50	4000.04
2	(add 21(a)(i), (a)(ii) and (b))	1112.58	4300.01
۷.	Committees	0.00	0.00
3.	Contributions to Federal Candidates/Committees and Other Political Committees	46000.00	249500.00
4.	Independent Expenditure	0.00	20000.00
5.	(use Schedule E)	0.00	2000.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
ŝ.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
3.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	365.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs) (d) Total Contribution Refunds	5.55	5.55
	(add Lines 28(a), (b), and (c))	0.00	365.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	.,	0.00	0.00
	(ii) "Levin" Share		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
۱.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	47112.58	274165.01
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	47112.58	274165.01
	from Line 31)	4/112.00	2/4100.01

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	19300.00	179600.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	365.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	19300.00	179235.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1112.58	4300.01
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	1112.58	4300.01

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6/31 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	ne name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	y Inc Politica	I Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) A. Mark Alford			Date of Receipt
Mailing Address 3113 Preston Hollow	Road		05 08 2006
City	State	Zip Code	Transaction ID: DNAPS2525511
Fort Worth	TX	76109-2050	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) 3. Robert Bullington	•		Date of Receipt
Mailing Address 4400 N 32nd Street S Biltmore Eye Physicia			05 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: CMDH9V390620
Phoenix	AZ	85018-3978	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self	Occupatio		Batch Tool - PAC
	Ophthalr		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) C. Carlos Buznego			Date of Receipt
Mailing Address 8940 N Kendall Drive	Suite 400E		05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 44036-22877138853073
<u>Miami</u>	<u>FL</u>	33176-2175	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Occupat self Ophtha		n nologist	PAC 2nd of 4
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		375.00]
SUBTOTAL of Receipts This Page (optional)	<u> </u>		1125.00
age (optional)			

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/31 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Ir	nc Political	I Committee (OPHTHPAC)	
Α.	Full Name (Last, First, Middle Initial) Antonio Capone Mailing Address 3535 W 13 Mile Road 632 William Beaumont M City Royal Oak FEC ID number of contributing federal political committee. Name of Employer	Medical Bu State MI	Zip Code 48073-6710	Date of Receipt M
	Receipt For: Primary General Other (specify) ▼	Ophthaln Aggregate	nologist e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Kristin Carter Mailing Address 5240 E Knight Drive Suit			Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Tucson FEC ID number of contributing federal political committee.	State AZ	Zip Code 85712-2122	Transaction ID: CMDH9V886088 Amount of Each Receipt this Period 500.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Batch Tool - PAC
 C.	Full Name (Last, First, Middle Initial) Frank Caserta Mailing Address 2600 S Rural Road			Date of Receipt 0 5 3 0 2 0 0 6
	City Tempe FEC ID number of contributing federal political committee.	State AZ	Zip Code 85282	Transaction ID: CMDH9V663991 Amount of Each Receipt this Period 300.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation ophthalm Aggregate		Batch Tool - PAC
s	UBTOTAL of Receipts This Page (optional)			1300.00
т.	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 8/31
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In			
۹.	Full Name (Last, First, Middle Initial) Steven Chen			Date of Receipt
	Mailing Address 27294 N 73rd Street			05 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Scottsdale	State AZ	Zip Code 85262-7613	Transaction ID: CMDH9V791993 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	03202 7010	250.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Gary Cowan			Date of Receipt
	Mailing Address 1350 S Main Street Suite	3200		05 26 7 2006
	City	State	Zip Code	Transaction ID: 46094-16112917661667
	Fort Worth	TX	76104-7669	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00 PAC 4th of 4
	Name of Employer self	Occupation Ophthaln		17.6 4.11 61 4
	Receipt For:	•	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
) .	Full Name (Last, First, Middle Initial) Mark Doubrava			Date of Receipt
	Mailing Address 9011 W Sahara Avenue S	Suite 101		05 30 2006
	City	State	Zip Code	Transaction ID: CMDH9V557154
	Las Vegas	NV	89117-4801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthaln		Baton 1001 1710
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
_ 	UBTOTAL of Receipts This Page (optional)			1000.00
_				
Т	OTAL This Period (last page this line number onl	y)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 9/31 (check only one)
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
	American Academy of Ophthalmology II	nc Political	Committee (OPHTHPAC)	
۸.	Full Name (Last, First, Middle Initial) William Ehlers			Date of Receipt
	Mailing Address 125 Secret Lake Road			05 13 2006
	City	State	Zip Code	Transaction ID: 44036-50042361021042
	Avon	CT	06001-3465	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthaln		PAC 2nd of 4
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	500.00	
3.	Full Name (Last, First, Middle Initial) Ofer Eytan			Date of Receipt
	Mailing Address 2525 W Greenway Road	05 / 30 / 4 2006		
	City	State	Zip Code	Transaction ID: CMDH9V721425
	Phoenix	AZ	85023-4280	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthaln		Balcii 1001 - FAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Gerald Ford			Date of Receipt
	Mailing Address 2600 S Rural Road			05 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Tempe	State AZ	Zip Code 85282-2448	Transaction ID: CMDAKR568676
			03202-2440	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthaln	nologist	Baton 1001-1 AO
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
S	JBTOTAL of Receipts This Page (optional)			1250.00
T	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 31 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	tements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	American Academy of Ophthalmology I	nc Politica	I Committee (OPHTHPAC)	
Α.	Full Name (Last, First, Middle Initial) Raul Franceschi Mailian Address (20, 0, 11, 11, 11, 11, 11, 11, 11, 11, 11	707		Date of Receipt
	Mailing Address 29 Calle Washington Su	lite 707		05 13 2006
	City	State	Zip Code	Transaction ID: 44036-82055300474167
	San Juan FEC ID number of contributing federal political committee.	PR C	00907-1503	Amount of Each Receipt this Period 250.00
	Name of Employer self	Occupatio Ophthalr		PAC 2nd of 4
	Receipt For: Primary General Other (specify) ▼	<u> </u>	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Michael Gilbert Mailing Address 12301 Northeast 10th Pl	laga Cuita	0	Date of Receipt
	Maining Address 12301 Northeast 10th Pl	ace Suite		05 11 2006
	City	State	Zip Code	Transaction ID: 44036-59188479185104
	Bellevue	WA	98005-2487	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00 PAC 3rd of 4
	Name of Employer self	Occupatio Ophthalr		
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	750.00	
С.	Full Name (Last, First, Middle Initial) Michael Green			Date of Receipt
	Mailing Address 854 Lone Oak Drive			05 13 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 44036-35201662778854
	Gallatin	TN	37066-3694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00 PAC 2nd of 4
	Name of Employer self	Occupatio Ophthalr	nologist	- 17.0 Zild 01 4
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			625.00
Т	OTAL This Period (last page this line number or	ılv)		

SC	HEDULE A (FEC Form 3X)		Lise separate schedule(s)	FOR LINE NUMBER: PAGE 11/31
	MIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any i	nformation copied from such Reports and Star commercial purposes, other than using the n	itements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
`	AME OF COMMITTEE (In Full) merican Academy of Ophthalmology I	nc Political	Committee (OPHTHPAC)	
4. <u>G</u>	ull Name (Last, First, Middle Initial) irant Heinz lailing Address 2250 W Southern Avent	ue Suite 10	2	Date of Receipt 0 5 3 0 2 0 0 6
	ity 1esa	State AZ	Zip Code 85202-4736	Transaction ID: CMDH9V513475 Amount of Each Receipt this Period
	EC ID number of contributing defeal political committee.	С		365.00
Se	ame of Employer elf	Occupation Ophthaln	nologist	Batch Tool - PAC
R _i	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 365.00	
3. <u>G</u>	ull Name (Last, First, Middle Initial)			Date of Receipt
_	lailing Address 1201 Summit Avenue			05 21 2006
	ity	State	Zip Code	Transaction ID: 8M8A39TDBBND0
FI	ort Worth EC ID number of contributing sederal political committee.	C	76102-4413	Amount of Each Receipt this Period 400.00
	ame of Employer elf	Occupation Ophthaln	nologist	PACWEB GENERATED CONTRIBU- TION
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
	ull Name (Last, First, Middle Initial) milio Justo			Date of Receipt
M	ailing Address 19052 N R H Johnson E	Boulevard		05 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity	State	Zip Code	Transaction ID: CMDH9V952645
	Sun City West	AZ	85375-4401	Amount of Each Receipt this Period
fe	EC ID number of contributing deral political committee.	C		500.00 Batch Tool - PAC
Se	ame of Employer elf	Occupation Ophthaln	nologist	Baleit 1001-1 AO
R(eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUE	BTOTAL of Receipts This Page (optional)		·····	1265.00
тот	TAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)		l la a agravata a abadula(a)	FOR LINE NUMBER: PAGE 12/31
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	n for the purpose of soliciting contributions
<u>Ş.</u>	NAME OF COMMITTEE (In Full)	arrio arrio ade	arood or arry pointion committee to	Solicit Contributions from Cuch Committee.
$ \rangle$	American Academy of Ophthalmology Is	nc Political	Committee (OPHTHPAC)	
	American Academy of Ophthalmology in	ic i dilloai	Committee (Crimin Ac)	
_	Full Name (Last, First, Middle Initial)			
Α.	Kurt Jute			Date of Receipt
	Mailing Address 1603 Medical Dr. Suite I)		05 19 2006
	City	State	Zip Code	Transaction ID: DNB7HF220725
	Laurinburg	NC	28352-5541	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer	Occupation	2	Batch Tool - PAC
	self	Ophthaln		
	Receipt For:		Year-to-Date ▼	-
	Primary General	7.99.094.0		1
	Other (specify) ▼	1	500.00	
ь	Full Name (Last, First, Middle Initial)			Data of Descipt
В.	Dennis Kilpatrick Mailing Address 7550 E 2nd Street			Date of Receipt
	Maining / Iddicos / 7550 E Zhid Street			05 30 2006
	City	State	Zip Code	Transaction ID: CMDH9V644884
	Scottsdale	AZ	85251-4504	Amount of Each Receipt this Period
	FEC ID number of contributing	C		500.00
	federal political committee.			300.00
	Name of Employer	Occupation	1	Batch Tool - PAC
	self	Ophthaln	nologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	
	Other (specify)		300.00	
_	Full Name (Last First Middle Initial)			
C.	Full Name (Last, First, Middle Initial) Paul Lee			Date of Receipt
	Mailing Address PO Box 3802			M M / D D / Y Y Y Y
	011		7' 0 1	05 12 2006
	City	State	Zip Code	Transaction ID: DNAWE3287665
	<u>Durham</u>	NC	27702-3802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		135.00
				Batch Tool - PAC
	Name of Employer self	Occupation		Balcii 100i - FAC
		Ophthaln	-	4
	Receipt For:	Aggregate	Year-to-Date ▼	. [
	Primary General Other (specify) ▼		500.00	
	Curior (opcorry)	-	0 0 0 0 0 0	
Г				
s	JBTOTAL of Receipts This Page (optional)		_	1135.00
\vdash				

TOTAL This Period (last page this line number only)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/31
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Δr	y information copied from such Reports and State	ements may	v not be sold or used by any perso	
or	ly information copied from such Reports and State for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Thomas Liesegang			Date of Receipt
	Mailing Address 4500 San Pablo Rd. S			05 / 19 / 2006
	City	State	Zip Code	Transaction ID: 41660-81309145689011
	<u>Jacksonville</u>	FL	32224-1865	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation		PAC
	Receipt For:	Ophthaln Aggregate	e Year-to-Date ▼	-
	Primary General Other (specify) ▼	Aggregate	250.00	
3.	Full Name (Last, First, Middle Initial) James Meador			Date of Receipt
	Mailing Address 300 E Osborn Road Suite	e 203		05 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: CMDH9V182930
	Phoenix	AZ	85012-2396	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation	n	Batch Tool - PAC
		Ophthaln		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
 C.	Full Name (Last, First, Middle Initial) Duane Mitzel			Date of Receipt
	Mailing Address 9797 E Larkspur Drive			05 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: CMDH9V702766
	Scottsdale	AZ	85260-4647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		e Year-to-Date ▼	1
	Primary General Other (specify) ▼		365.00	
s	UBTOTAL of Receipts This Page (optional)			980.00
T	OTAL This Period (last page this line number on	ly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 31 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	c Political	Committee (OPHTHPAC)	
A.	Full Name (Last, First, Middle Initial) Thomas Moore Mailing Address 2001 Coolidge Road Lansing Ophth City East Lansing FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State MI C Occupation Ophthaln Aggregate		Date of Receipt M M M
3.	Full Name (Last, First, Middle Initial) Sanford Moretsky Mailing Address 2125 W Indian School Ro City Phoenix FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State AZ C Occupation Ophthaln		Date of Receipt M M D D 2 0 0 6 Transaction ID: CMDH9V841896 Amount of Each Receipt this Period
C.	Full Name (Last, First, Middle Initial) Steven Mortenson Mailing Address 831 Gail Gardner Way City Prescott FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State AZ C Occupation Ophthaln Aggregate		Date of Receipt M M M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)			1365.00
Т	OTAL This Period (last page this line number onli	v))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 31 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and State for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	me and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u>/</u> A.	Full Name (Last, First, Middle Initial) Mansoor Movaghar Mailing Address 305 N Blount St. Apt. A City Madison FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary Other (specify) General Other (specify)	State WI C Occupation Ophthaln Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Jerry Neuwirth Mailing Address 85 Seymour Street Suite City Hartford FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary Other (specify) General Other (specify)	State CT C Occupation Ophthaln		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) David Parke Mailing Address 608 Stanton L Young Bou Dean A McGee Eye Inst City Oklahoma City FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State OK C Occupation Ophthaln		Date of Receipt M
S	UBTOTAL of Receipts This Page (optional)			702.50
т	OTAL This Period (last page this line number onl	v)	b	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/31
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	ny information copied from such Reports and Stat	ements may	v not be sold or used by any perso	
or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Steven Perlmutter			Date of Receipt
	Mailing Address 1530 W Glendale Avenue	e Suite 10		05 30 7 2006
	City	State	Zip Code	Transaction ID: CMDH9V447395
	Phoenix	AZ	85021-8578	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer self	Occupation	 n	Batch Tool - PAC
	self	Ophthaln		
	Receipt For:		e Year-to-Date ▼	
	Primary General		365.00	
	Other (specify) ▼	0 0	303.00	
3.	Full Name (Last, First, Middle Initial) George Reiss			Date of Receipt
	Mailing Address 6677 W Thunderbird Roa	ad Suite F	101	05 30 7 2006
	City	State	Zip Code	Transaction ID: CMDH9V512555
	Glendale	AZ	85306-3723	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Batch Tool - PAC
	self	Ophthaln		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	
	Other (specify) ▼	0 0	0 0 0 0 0 0	
Э.	Full Name (Last, First, Middle Initial) Michael Ruddat			Date of Receipt
	Mailing Address 85 Seymour Street Suite	822		05 02 7 2006
	City	State	Zip Code	Transaction ID: DNAFVD958638
	Hartford	CT	06106-5527	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer self	Occupation		Batch Tool - PAC
		Ophthaln	<u> </u>	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	365.00	
			0 0 0 0 0 0 0	
s	UBTOTAL of Receipts This Page (optional)		·····	1730.00
T	OTAL This Period (last page this line number on	ly)		
-		,,		

SCHEDULE A (FEC Form 3X)	ı	Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/31
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog			
Full Name (Last, First, Middle Initial) David Shulman Mailing Address 999 E Basse Road S	uite 127		Date of Receipt
		7. 0.1.	05 13 2006
City <u>San Antonio</u>	State TX	Zip Code 78209-1802	Transaction ID: 44036-57001894712448 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer self	Occupatio Ophthalr		PAC 2nd of 4
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Jack Sipperley			Date of Receipt
Mailing Address 1101 E Missouri Aver	nue		05 30 Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: CMDH9V216372
Phoenix	AZ	85014-2709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
Name of Employer self	Occupatio Ophthalr		Batch 1001 - FAC
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address 43 Woodland Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: DNB7HF264284
Hartford	СТ	06105-2363	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
Name of Employer self	Occupatio Ophthalr		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last page this line number	er only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 31 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	nc Politica	I Committee (OPHTHPAC)	
A	Full Name (Last, First, Middle Initial) Errol Sweet Mailing Address 2525 W Greenway Road City Phoenix FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ira Udell Mailing Address 600 Northern Boulevard	State AZ C Occupatio Ophthalr Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Great Neck FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State NY C Occupatio Ophthalr		Transaction ID: DNBDXX624810 Amount of Each Receipt this Period 125.00 PAC 2nd of 4
)	Full Name (Last, First, Middle Initial) Aaron Weingeist Mailing Address 3934 S Americus Street City Seattle FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State WA C Occupatio Ophthalr Aggregate		Date of Receipt M
s	UBTOTAL of Receipts This Page (optional)			750.00
т	OTAL This Period (last page this line number or	ılv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/31
TEMIZED RECEIPTS		or each category of the	(check only one)
···		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Academy of Ophthalmology Inc	c Political	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) A. Ruth Williams			Date of Receipt
Mailing Address 2015 N Main Street Wheaton Eye Clinic			05 22 7 2006
City Wheaton	State IL	Zip Code 60187-3152	Transaction ID: DNBCDG268298
FEC ID number of contributing		00107-3132	Amount of Each Receipt this Period
federal political committee.	C		335.00
colf	Occupation Ophthaln		Batch Tool - PAC 2nd of 3
Receipt For:	_ •	Year-to-Date ▼	
Primary General	00 0	670.00	
Other (specify) ▼	0 0	670.00	
Full Name (Last, First, Middle Initial) 3. Curtis Winkler			Date of Receipt
Mailing Address 2220 N Hunt Circle			05 30 7 2006
City	State	Zip Code	Transaction ID: CMDH9V187831
Mesa	AZ	85203-2085	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		365.00
colf	Occupation		Batch Tool - PAC
Receipt For:	Ophthaln	nologist e Year-to-Date ▼	_
Primary General	Aggregate	1 1 1 1 1 1 1	
Other (specify) ▼		365.00	
Full Name (Last, First, Middle Initial) C. Kirk Winward			Date of Receipt
Mailing Address 359 8th Avenue Suite 210)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: DNBDYE480745
Salt Lake City	UT	84103-2895	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		365.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For:		e Year-to-Date ▼	1
Primary General	_ · · ·	365.00	
Other (specify) ▼	0 0		
SUBTOTAL of Receipts This Page (optional)		·····	1065.00
TOTAL This Period (last page this line number only	y))	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	Check only one PAGE 20 / 31
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology			Solicit Contributions from Such Confillities.
Full Name (Last, First, Middle Initial) Richard Zak Mailing Address 1300 N Highland Avenu City Aurora FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State IL C Occupation Ophthalm		Date of Receipt M M
Full Name (Last, First, Middle Initial) Marco Zarbin Mailing Address 90 Bergen Street Suite City Newark FEC ID number of contributing federal political committee. Name of Employer UMDNJ Receipt For: Primary General Other (specify)	State NJ C Occupation Ophthalm	Zip Code 07103-2425	Date of Receipt M M J D D J 2006 Transaction ID: 8INKJR3F1BND2 Amount of Each Receipt this Period 500.00 PACWEB GENERATED CONTRIBUTION
Full Name (Last, First, Middle Initial) Kent Zocchi Mailing Address 27 Montebello Road City Pueblo FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State CO C Occupation Ophthalm Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			1591.25
TOTAL This Period (last page this line number of	only)		17133.75

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 31 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
Any information copied from such Reports and Stator for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	nc Political Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Union Bank		Date of Receipt
Mailing Address 400 California Street		05 31 2006
City	State Zip Code	Transaction ID: 9695640606144259230
San Francisco	CA 94104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.95
Name of Employer	Occupation	MM interest 5/06
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.48	

SUBTOTAL of Receipts This Page (optional)	>	60.95
TOTAL This Period (last page this line number only)	•	60.95

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5(CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 22/31
ΙT	EMIZED DISBURSEMENTS	for each category of the	(check onl	y one)
•		Detailed Summary Page	X 21b	22 23 24 25 26
			27	28a 28b 28c 29 30b
	y Information copied from such Reports and Sta		, , ,	
or	for commercial purposes, other than using the n	ame and address of any political co	mmittee to so	plicit contributions from such committee
\	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology I	nc Political Committee (OPH	THPAC)	
	Full Name (Last, First, Middle Initial)			Transaction ID: 1452580606144262614
٩.	Union Bank			Date of Disbursement
				05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 400 California Street			05 7 3 1 7 2 0 0 6
	City	State Zip Code		Amount of Each Disbursement this Period
	San Francisco	CA 94104		
	Purpose of Disbursement	l r		1112.58
	Bank charges 5/06			
	Candidate Name		Category/	
			Type	
	Office Sought: House Disbu	rsement For:		
	Senate	Primary General		
	President	Other (specify)		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)				•	•	1112.58
SOBTOTAL OF DISDUISEMENTS THIS Fage (Optional)		_	_	-		
TOTAL This Period (last page this line number only)	•					1112.58

	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)						IE NUMBER: PAGE 23 / 31 nly one)								
IT _	EMIZED DISBURSEMENTS	for each	category of the Summary Page			21b 27	ŕ	22 28a	Х	23 28b	<u>,</u> [24 28c		25 29		26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name														s	
\vdash	NAME OF COMMITTEE (In Full)															
\rangle	American Academy of Ophthalmology Inc	Political C	committee (OP	HTI	ΉF	PAC)										
Α.	Full Name (Last, First, Middle Initial) Cap Pac							Trans Date				27754 ent	4060	5113	8174	I66
	Mailing Address 38 Ivy Street Southeast							0 ^M 5	М	/ [11		Ý ž	0 ŏ 6	S Y	
		State DC	Zip Code 20003					Amou	unt c	f Ea	ch D	isburs	emen	t this f	Period	t
	Purpose of Disbursement 2006 Contribution					•		L.		-		•	2	2500.	00	_
	Candidate Name			С		gory/ pe										
	Senate President	ment For: Primary Other (spe	General ecify) ▼													
	State: District:															
В.	Full Name (Last, First, Middle Initial) Charles Boustany Jr Md for Congress Inc							Trans Date		isbu						364
	Mailing Address Post Office Box 80126							0 5	IVI	/ L	11		Ż	οŏε	3	
	Lafayette	State LA	Zip Code 70598					Amou	unt c	f Ea	ch D	isburs				k
	Purpose of Disbursement 2006 General Candidate Name								0	0		•		2500.	00	_
	Boustany Charles			C		gory/ pe										
	Senate President	ment For: Primary Other (spe	2006 X General			-										
_	State: LA District: 07															
C.	Full Name (Last, First, Middle Initial) Charlie Dent for Congress							Trans Date		isbu	rsem					397
	Mailing Address PO Box 442							0 5	IVI	<u> </u>	11		<u>'</u> 2	οŏε	<u>`</u>	
	Allentown	State PA	Zip Code 18105					Amou	unt c	f Ea	ch D	isburs	-			k
	Purpose of Disbursement 2006 General Candidate Name									0		•	. 1	000.	JU	_
	Dent Charles	ment For:	2006			gory/ pe										
	Senate President State: PA District: 15	Primary Other (spe	X General													
ء	UBTOTAL of Disbursements This Page (optional) .					. ,	 >						6	000.0	00	$\overline{1}$
	OTAL This Period (last page this line number only)					<u>'</u>	_		•	•	-	-				ī

TELUZED DISSUBSECTION	Use seperate schedule(s)		check or			١.		LPA	4GE	24 / 3)	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	F	21b 27	Á	22 28a	_	23 28b	24 28c	H	25 29	П	26 30b
Any Information copied from such Reports and Stater											3	
or for commercial purposes, other than using the name	e and address of any political co	omm	ittee to s	solicit	contrib	outio	ns fro	m such	comn	nittee		
NAME OF COMMITTEE (In Full)	/											
American Academy of Ophthalmology Inc	Political Committee (OPH	THE	PAC)									
Full Name (Last, First, Middle Initial)				-	Transa	ctio	n ID:	182618	3060	52248	3163	361
Chocola for Congress Inc					Date of	_			v · v	· · ·	V	
Mailing Address PO Box 6728					0 5		^D 2	2	2	006		
City South Bond	State Zip Code IN 46660				Amoun	t of I	Each	Disburse	emen	t this P	erio	d
South Bend Purpose of Disbursement	11N 4000U								1	000.0	00	
2006 General							-		0	-		_
Candidate Name Chocola Chris			egory/ /pe									
	ement For: 2006											
Senate President	Primary X General Other (specify) ▼											
State: IN District: 02	• • • • • • • • • • • • • • • • • • •											
Full Name (Last, First, Middle Initial)					Transa	ctio	n ID:	687829	9060	52249	9014	 451
Gubin for Congress Inc					Date of	f Dis		ment	v * v	, V	V	
Mailing Address Post Office Box 4657 PO Box 4657					0 5	_	2	2	. 2	0 0 6		
City Casper	State Zip Code WY 82604				Amoun	t of I	Each	Disburse	emen	t this P	erio	d
Purpose of Disbursement 2006 General									_ 1	0.000	00	
Candidate Name Cubin Barbara	,		egory/ /pe									
Office Sought: X House Disburs Senate President State: WY District: 01	ement For: 2006 Primary X General Other (specify)											
Full Name (Last, First, Middle Initial)				+.	-			00000		F0004	170	
Dave Camp for Congress 2006					Date of	f Dis		229309 ment				519
Mailing Address 5915 Eastman Avenue S	Suite 100				0 5		0		2	0 0 6		
City Midland	State Zip Code MI 48640				Amoun	it of I	Each	Disburse	-			d
Purpose of Disbursement 2006 Primary							•	-	1	000.0	00	
Candidate Name Camp Dave	,		egory/ /pe									
Senate X President	ement For: 2006 Primary General Other (specify)											
State: MI District: 04												
SUBTOTAL of Disbursements This Page (optional)		<u></u>	. •						3	0.000	0	
TOTAL This Period (last page this line number only							•			•		\neg

		Use seperate schedule(s)		check o			٦.		PF	4GE	25 / 3) [
T	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b		22 [28a	X 2	3 8b	24 28c	П	25 29	П	26 30b
An	y Information copied from such Reports and Stater	nents may not be sold or use	d bv ar		1 for					ontri		╙	300
	for commercial purposes, other than using the nam												
$\overline{\ }$	NAME OF COMMITTEE (In Full)												
/	American Academy of Ophthalmology Inc	Political Committee (OF	HTH	PAC)									
	Full Name (Last, First, Middle Initial)					Transa	action	ı ID: 8	858481	060	52248	3837	760
۹.	Earl Pomeroy for Congress					Date o	_			/ <u>Y</u>	Y	Υ	
	Mailing Address PO Box 9336				0 5 M / D 2 D / Y 2 0 0 6 Y								
	City Fargo	State Zip Code ND 58106				Amour	nt of E	ach I	Disburse	emen	t this P	erio	b
	Purpose of Disbursement	30100								1	500.0	00	П
	2006 General								-	-	•	-	
	Candidate Name Pomeroy Earl			egory/ ype									
		ement For: 2006											
	Senate President	Primary X General Other (specify) ▼											
	State: ND District: 01	Other (specify)											
	Full Name (Last, First, Middle Initial)					Tranca	ection	ı ID.	220509	กลก	52247	775-	136
3.	Friends of Mark Foley				Date o	f Disk	ourse	ment	/ · V	· V	V	100	
	Mailing Address 1316 Lake Victoria Drive					0 5		^D 2	Ž	2	0 0 6		
	City Lake Worth	State Zip Code FL 33461				Amour	nt of E	ach I	Disburse	emen	t this P	erio	t
	Purpose of Disbursement 2006 Primary									2	2500.0	00	
	Candidate Name Foley Mark			egory/ ype									
	Senate X President	ement For: 2006 Primary General Other (specify)											
	State: FL District: 16												
Э.	Full Name (Last, First, Middle Initial) Friends of Max Burns					Transa Date o			551793 ment	060	52247	7947	789
Mailing Address PO Box 1965							1 /	^D 2	2 /	2 ž	0 ŏ 6	Υ	
	City Sylvania	State Zip Code GA 30467				Amour	nt of E	Each I	Disburse	emen	t this P	erio	d
	Purpose of Disbursement 2006 Primary									2	2500.0	00	
	Candidate Name Burns Max			egory/ ype									
	-	ement For: 2006 Primary General Other (specify)											
	State. GA DISTITUTE 12						_						
S	UBTOTAL of Disbursements This Page (optional)			▶						6	500.0	0	
T	OTAL This Period (last page this line number only												

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	NUMBER:	AGE 26/3	26 / 31		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27		23 24 28b 28c	25 29	26 30b	
Any Information copied from such Reports and Staten						5	
or for commercial purposes, other than using the nam	e and address of any political co	orminitee to so	IIOIL CONTRIDUTIO	JIIS ITOITI SUCN	Committee		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political Committee (OPH)	ГНРАС)					
Full Name (Last, First, Middle Initial) A. Hulshof for Congress - District 09 Missour			Date of Dis	on ID: 111294 sbursement		_	
Mailing Address PO Box 1621			05	0 4	Ý Ž0Ŏ6		
City Columbia	State Zip Code MO 65205		Amount of	Each Disburs		-	
Purpose of Disbursement 2006 General					2000.0	00	
Candidate Name Hulshof Kenny		Category/ Type					
Office Sought: X House Disburse Senate President State: MO District: 09	ment For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)				on ID: 87354	106050361	158384	
Jeb Bradley for Congress			Date of Dis	sbursement	YYYY	Υ	
Mailing Address 645 South Main Street			0 5	0 4	Ý Ž0Ŏ6		
City Wolfeboro	State Zip Code NH 03894		Amount of	Each Disburs		-	
Purpose of Disbursement 2006 Primary					1500.0	00	
Candidate Name Bradley Joseph		Category/ Type					
Senate X President	ement For: 2006 Primary General Other (specify)						
State: NH District: 01 Full Name (Last, First, Middle Initial)			Tropostic	on ID: 484848	000000000	10056	
Jerry Weller for Congress Inc.				sbursement			
Mailing Address PO Box 2368			0 5	^D 2 2 /	[*] 2006		
City Joliet	State Zip Code IL 60434		Amount of	Each Disburs		-	
Purpose of Disbursement 2006 General	Γ				1000.0	00	
Candidate Name Weller Gerald		Category/ Type					
Office Sought: X House Disburse Senate President State: IL District: 11	ment For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)					4500.0	0	
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1		IITTEE (In Full)															
/ An	nerican Acad	emy of Ophthalmo	logy Inc I	Political C	ommittee (OP	HTHI	PAC)										
	,	First, Middle Initial)							Transa	actio	on ID:	529892	2060	51138	356	141	
4. Jo	hn Sullivan fo	or Congress Inc							Date o	f Dis			Y Y	Υ	Υ		
Ма	iling Address	Post Office Box	470840					05 11 1 2 0 0 6									
Cit	y Ilsa			State OK	Zip Code 74147				Amour	nt of	Each	Disburse	emen	t this F	Perio	d	
	rpose of Disbur	sement		OK	74147								2	2500.0	00		
200	06 General												_				
	ndidate Name Illivan John						egory/ ype										
Off	fice Sought:	χ House	Disburse	ment For:	2006												
		Senate President		Primary Other (spe	X General												
Sta	ate: OK	District: 01		Outlot (opo	o.i.y) ∀												
Ful	II Name (Last, F	First, Middle Initial)							Transa	actio	on ID:	824384	1060	52249	908	678	
3. Jo	n Kyl for U S	Senate							Date o		sburse	ement	v * v	V	V		
Ма	iling Address	PO Box 10246							0 ^M 5		້2	2 /	2	0 0 6			
City Ph	y noenix			State AZ	Zip Code 85064				Amour	nt of	Each	Disburse	emen	t this F	erio	d	
	rpose of Disbur 06 General	rsement							<u></u>				1	500.0	00		
	ndidate Name I Jon						egory/ ype										
Off	fice Sought:	House X Senate President	Disburse	ment For: Primary Other (spe	2006 X General cify) ▼												
	ate: AZ	District: 00															
	ll Name (Last, F n Kyl for U S	First, Middle Initial) Senate							Transa Date o			081009 ment	9060	50362	217	220	
Ma	iling Address	PO Box 10246				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$											
City Ph	y ioenix			State AZ	Zip Code 85064				Amour	nt of	Each	Disburse	emen	t this F	Perio	d	
	rpose of Disbur 06 General	rsement							L.				. 1	0.00.0	00		
	ndidate Name I Jon						egory/ ype										
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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	Ally 0	22 28a	X 23 28b	24		25 29		26 30b		
	y Information copied from such Reports and Statem										3			
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	American Academy of Ophthalmology Inc	Political Committee (OP	HTH	PAC)										
	Full Name (Last, First, Middle Initial)							: 14017	72060	50362	2104	167		
٩.	Kenny Marchant for Congress						Disburs		V ,	/ · · ·	٧			
	Mailing Address PO Box 110187					0 5		04	2	2 0 ŏ 6				
		State Zip Code TX 75011				Amoun	t of Eacl	h Disbur	semer	nt this P	erioc	t		
	Purpose of Disbursement	10011								2500.0	0			
	2006 General Candidate Name		Cat	egory/										
	Marchant Kenny			ype										
		ement For: 2006 Primary X General												
	Senate President	Other (specify)												
	State: TX District: 24													
3.	Full Name (Last, First, Middle Initial) Pallone for Congress						ction ID	: 83940	07060	51138	3416	088		
						M M	/ D	D /	Y	2 0 Ď 6	Υ			
	Mailing Address PO Box 3176					0 5		11		2006				
	,	State Zip Code NJ 07740				Amoun	t of Eacl	h Disbur	semer	nt this P	erioc	t t		
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	2006 General Candidate Name			/										
	Pallone Frank			egory/ ype										
		ement For: 2006												
	Senate President	Primary X General Other (specify) ▼												
	State: NJ District: 06													
Э.	Full Name (Last, First, Middle Initial) Pete Sessions for Congress 2006						ction ID): 16622 sement	25060)52248	3945	73		
					_	0 5 M	_	2 2	Y	2 0 0 6	Υ			
	Mailing Address Post Office Box 38585					-								
	City Dallas	State Zip Code TX 75238				Amoun	t of Eacl	h Disbur	semer	nt this P	erioc	t l		
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	Candidate Name			egory/										
	Sessions Pete Office Sought: X House Disburse	ement For: 2006	Т	уре										
	Senate Disburse	Primary X General												
	President State: TX District: 32	Other (specify)												
	Side. 17. District. 02											_		
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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	A II Y OI	22) 28a	23 28b	24 28c	Н	25 29	ш	26 30b
	y Information copied from such Reports and Statem											
Or I	for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political	COITII	millee lo	SOIICI	CONTINUE	ILIONS III	om such	COMI	iiilee		
\rangle	American Academy of Ophthalmology Inc	Political Committee (OP	HTH	PAC)								
	Full Name (Last, First, Middle Initial)					Transac	tion ID:	: 595726	3060	50361	955	<u>—</u>
٠.	Price for Congress					Date of [Disburse		V V	V	V	
	Mailing Address PO Box 425					0 ^M 5 M	ا ا ا) 4 /	Ż	0 Ď 6	1	
		State Zip Code GA 30077				Amount	of Each	Disburs	emen	t this P	eriod	
	Purpose of Disbursement	30077							2	2500.0	0	7
	2006 General											
	Candidate Name Price Thomas			tegory/ ype								
	Senate	ment For: 2006 Primary X General										
	State: GA District: 06	Other (specify)										
	Full Name (Last, First, Middle Initial)				١.	Transac	tion ID:	: 197144	1060	50361	787	
3.	Pryce for Congress					Date of [Disburse	ement				
	Mailing Address 145 East Rich Street					0 5	0	4	2	0 0 6		
	,	State Zip Code OH 43215				Amount	of Each	Disburs	emen	t this P	eriod	_
Purpose of Disbursement 2006 General									. 1	0.000	0	_
	Candidate Name Pryce Deborah			tegory/ ype								
	Office Sought: X House Disburse Senate President	ment For: 2006 Primary X General Other (specify)										
	State: OH District: 15											
Э.	Full Name (Last, First, Middle Initial) Richard E Neal for Congress Committee					Transac Date of [: 782385 ement	5060	52248	042	50
	Mailing Address 76 Magnolia Terrace					0 5	[′] 2	2 2 /	Ý Ž	0 0 6	Y	
	,	State Zip Code MA 01108				Amount	of Each	Disburs	emen	t this P	eriod	_
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	Candidate Name Neal Richard			tegory/ ype								
	-	ment For: 2006 Primary General Other (specify)										
s	UBTOTAL of Disbursements This Page (optional) .			•				• • •	4	500.0	0	7
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ITEMIZED DISBURSEME	ENTS		category of the Summary Page		21b 27		22 28a		23 28b	24 28c	П	25 29	ш	26 30b
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NAME OF COMMITTEE (In Full)	using the name	e and addres	ss of any political	COITII	millee lo	SOIIC	it Contin	bullo	115 110	om Sucm	COITII	iiillee		
American Academy of Ophtha	almology Inc	Political C	Committee (OP	HTH	PAC)									
Full Name (Last, First, Middle Initial)						Transa	actio	n ID:	718370	0060	52248	8693	32
Schwarz for Congress							Date o				V V	V	V	
Mailing Address Post Office						0 ^M 5		ຶ2	2 /	2	0 0 6			
City Battle Creek							Amour	nt of	Each	Disburs	emen	t this P	erioc	t
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Candidate Name Schwarz John					tegory/ ype									
Office Sought: X House	Disburse	ment For:	I		урс									
Senate		Primary	X General											
State: MI District: 07		Other (spe	ecity) 🔻											
Full Name (Last, First, Middle Initial	 						Transa	actio	n ID:	518876	3060	52240	1225	 :80
Senate Majority Committee							Date o		burse	ment				,00
Mailing Address PO Box 401 Suite 300	77						0 5		2	2 /	2	0 Ď 6		
City Washington		State DC	Zip Code 20016				Amour	nt of	Each	Disburs	emen	t this P	erioc	i
Purpose of Disbursement 2006 Contribution								_			5	5000.0	0	
Candidate Name					tegory/ ype									
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Simmons for Congress	,						Date o	f Dis	burse				_	180
Mailing Address PO Box 268	Drawer 271						0 5	M /	^D 0	4 /	ž	0 Ó 6	Y	
City Stonington		State CT	Zip Code 06378				Amour	nt of	Each	Disburs	emen	t this P	erioc	t
Purpose of Disbursement 2006 Primary											. 1	000.0	0	
Candidate Name Simmons Rob					tegory/ ype									
Office Sought: X House Senate President State: CT District: 02		ment For: Primary Other (spe	2006 General ecify) ▼		<u>, </u>									
	lana (autharah										8	500.0	0	$\overline{}$
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	y Information copied from such Reports and for commercial purposes, other than using the									
$\overline{}$	NAME OF COMMITTEE (In Full)									
	American Academy of Ophthalmolog	gy Inc Political Committee (OPH	THPAC)							
	Full Name (Last, First, Middle Initial)			Transaction ID: 4482660605224915257						
۹.	Together for Our Majority Political Ac OMPAC)	ction Committee (T-		Date of Disbursement						
	Mailing Address PO Box 16488		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	City	State Zip Code		Amount of Each Disbursement this Period						
	Arlington	VA 22215		0500.00						
	Purpose of Disbursement 2006 Contribution			2500.00						
	Candidate Name		Category/ Type							
	Office Sought: House D	isbursement For:								
	Senate	Primary General								
	President	Other (specify)								
	State: District:									

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